

Nov

# Work Order ID 91138

October-03-12 9:00:50 AM

\*91138\*

Page 1

Item ID: D3805-041  
Revision ID:  
Item Name: Wearplate Assembly Fwd, Low Gear  
Start Date: 03/10/2012 Start Qty: 8.00  
Required Date: 12/11/2012 Req'd Qty: 8.00

Accept

\*N900040100\*

Setup Start \*NS1\*

Stop \*NS2\*

Cust Item ID:

Customer:

## Reference:

Approvals: Process Plan: MLJ Date: 12-10-03 Tooling: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_

Run Start \*NR1\*

Stop \*NR2\*

| Sequence ID/<br>Work Center ID | Operation<br>Description   | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr                       | Revision Nbr   |                      |         |        |              |               |               |                  |                |
| D3805                          | B  |                      |         |        |              |               |               |                  |                |
| 100                            |  | 0.00                 |         |        |              |               |               |                  |                |
| *100*                          |  |                      |         |        |              |               |               |                  |                |
| Large Fab                      |  |                      |         |        |              |               |               |                  |                |
| Large Fab                      |  |                      |         |        |              |               |               |                  |                |
|                                | Memo   | 0.00                 |         |        |              |               |               |                  |                |
|                                | 1- On D3806-1, fill cut outs with hardcoat welding rod as per dwg D3805<br>2059 B Hardcoat Welding Rod<br>BATCH#: <u>M123215</u> |                      |         |        |              |               |               |                  |                |
|                                | 2-weld D3806-1 to D3805-1 together as per dwg D3805<br>304 S.S. Welding Rod<br>BATCH #: <u>M116577</u>                           |                      |         |        |              |               |               |                  |                |
|                                | 3-Transfer drill holes in bar  |                      |         |        |              |               |               |                  |                |
| 110                            |  |                      |         |        |              |               |               |                  |                |
| *110*                          |  |                      |         |        |              |               |               |                  |                |
| QC                             |  |                      |         |        |              |               |               |                  |                |
| Quality Control                |  |                      |         |        |              |               |               |                  |                |
|                                | QC9- Inspect visual per QSI004- Fusion Welds   | 0.00                 |         |        |              |               |               |                  |                |
|                                | Memo   | 0.00                 |         |        |              |               |               |                  |                |

8 12-10-29 PD/MAL



8

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|------------------------------------|--|--------------------------------------|---|----------------------|--|----------------|--------------|--------------|--|--|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |                                    |  |                                      | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td style="width:33%;">Skid-tube <input type="checkbox"/></td> <td style="width:33%;">Crosstube <input type="checkbox"/></td> <td style="width:33%;">Water Jet <input type="checkbox"/></td> <td style="width:33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                |              |              |  |  | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/> |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>     |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>       |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/>            |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Root Cause</b>  | Date                               | Step   | Qty                                  | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description  | Sign &<br>Date | Verification | QC Inspector |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Doc/Data <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Equip/Tooling <input type="checkbox"/>                       |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Operator <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Material <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Setup <input type="checkbox"/>                               |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Other <input type="checkbox"/>                               |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Process <input type="checkbox"/>                             |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Supplier <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Training <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Unapproved <input type="checkbox"/>                          |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| FAULT CATEGORY  |  |  |   |  |  |   |  |  |  |  |   |  |
|---|--|--|---|--|--|---|--|--|--|--|---|--|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |  |  | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |  |  | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions |  |  | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |
|   |  |  |   |  |  |   |  |  |  |  |   |  |
|   |  |  |   |  |  |   |  |  |  |  |   |  |
|   |  |  |   |  |  |   |  |  |  |  |   |  |

# Work Order ID 91138

October-03-12 9:00:50 AM

**\*91138\***

Page 2

Item ID: D3805-041

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Wearplate Assembly Fwd, Low Gear

Start Date: 03/10/2012 Start Qty: 8.00

**\*8\***

Cust Item ID:

Required Date: 12/11/2012 Req'd Qty: 8.00

**\*8\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***  
Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                      | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 120                            | QC5- Inspect part completeness to step on W/O | 0.00                 |         |        |              |               |               |                  |                |
| <b>*120*</b>                   |   |                      |         |        |              |               |               |                  |                |
| QC                             | Memo  | 0.00                 |         |        |              | 8             |               |                  |                |
| Quality Control                |   |                      |         |        |              |               |               |                  |                |
| 130                            | Grey Sandtex(Ref:4.3.5.6) per QSI005 4.3      | 0.00                 |         |        |              |               |               |                  |                |
| <b>*130*</b>                   |   |                      |         |        |              |               |               |                  |                |
| Powdercoat                     |   |                      |         |        |              |               |               |                  |                |
| Powder Coating                 | Memo  | 0.00                 |         |        |              |               |               |                  |                |
|                                | START TIME: 2:45                              |                      |         |        |              |               |               |                  |                |
|                                | OVEN TEMPERATURE: 320 °F                      |                      |         |        |              |               |               |                  |                |
|                                | FINISH TIME: 3:15                             |                      |         |        |              |               |               |                  |                |
| 140                            | QC3- Inspect Part Finish                      | 0.00                 |         |        |              |               |               |                  |                |
| <b>*140*</b>                   |   |                      |         |        |              |               |               |                  |                |
| QC                             | Memo  | 0.00                 |         |        |              | 8             |               |                  |                |
| Quality Control                |   |                      |         |        |              |               |               |                  |                |

8X ✓ MZ  
12/10/2012

8 φ 12-10-29

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |             |             |            |   |                          |   |                        |                     |                     |  |  |
|--|-------------|-------------|------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |             |             |            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                        |                     |                     |  |  |
| <b>Root Cause</b>  | <b>Date</b> | <b>Step</b> | <b>Qty</b> | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>   | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |
| Doc/Data   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Equip/Tooling  |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Operator   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Material   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Setup  |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Other  |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Process  |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Supplier   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Training   |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Unapproved   |             |             |            |   |                          |   |                        |                     |                     |  |  |

| FAULT CATEGORY  |   |   |   |  |
|---|---|---|---|--|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |  |

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[illegible]

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|   |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|---|------------------------------------|--|---|---|----------------------|--|----------------|--------------|---|--|--|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____  |                                    |  |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                |              |   |  |  | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>  | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/>  |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>  | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>  |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>  | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>  |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>  | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/>            |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Root Cause</b>   | Date                               | Step   | Qty   | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description  | Sign &<br>Date | Verification | QC Inspector  |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Doc/Data <input type="checkbox"/>   |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Equip/Tooling <input type="checkbox"/>  |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Operator <input type="checkbox"/>   |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Material <input type="checkbox"/>   |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Setup <input type="checkbox"/>  |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Other <input type="checkbox"/>  |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Process <input type="checkbox"/>  |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Supplier <input type="checkbox"/>   |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Training <input type="checkbox"/>   |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Unapproved <input type="checkbox"/>   |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>FAULT CATEGORY</b>   |                                    |  |   |   |                      |  |                |              |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |                                    |  | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                      | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions  |                |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

**Work Order ID 91138**

October-03-12 9:00:50 AM

**\*91138\***

Page 4

Item ID: D3805-041

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Wearplate Assembly Fwd, Low Gear

Start Date: 03/10/2012 Start Qty: 8.00

**\*8\***

Cust Item ID:

Required Date: 12/11/2012 Req'd Qty: 8.00

**\*8\***



Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                    | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 180                            | QC21- Final Inspection - Work Order Release | 0.00                 |         |        |              |               |               |                  |                |
| <b>*180*</b>                   |   |                      |         |        |              |               |               |                  |                |
| QC                             | Memo  | 0.00                 |         |        |              |               |               |                  |                |
| Quality Control                |   |                      |         |        |              |               |               |                  |                |

12/10/31  12-10-31

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|------------------------------------|--|--------------------------------------|---|--------------------------|--|------------------------|---------------------|---------------------|--|--|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |                                    |  |                                      | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                        |                     |                     |  |  | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/> |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>     |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>       |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/>            |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Root Cause</b>  | <b>Date</b>                        | <b>Step</b>                                  | <b>Qty</b>                           | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>  | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Doc/Data <input type="checkbox"/>                            |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Equip/Tooling <input type="checkbox"/>                       |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Operator <input type="checkbox"/>                            |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Material <input type="checkbox"/>                            |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Setup <input type="checkbox"/>                               |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Other <input type="checkbox"/>                               |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Process <input type="checkbox"/>                             |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Supplier <input type="checkbox"/>                            |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Training <input type="checkbox"/>                            |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Unapproved <input type="checkbox"/>                          |                                    |  |                                      |   |                          |  |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| FAULT CATEGORY  |   |   |   |
|---|---|---|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |



# Picklist Print

October-03-12 9:00:54 AM

Page 1

Work Order ID: 91138

\*91138\*

Parent Item: D3805-041

\*D3805-041\*

Parent Item Name: Wearplate Assembly Fwd, Low Gear

Start Date: 03/10/2012

Required Date: 12/11/2012

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP Rev:A 08-07-21 new issue DD verified by:EC IPP Rev:B 09-03-04 rev.a as per dwg DD verified by:EC IPP Rev:C 11.10.04 rev.b as per dwg DD verified by:EC

| Component Item ID/<br>Item Name | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| D3805-1                         |                        | Manufactured  | No          |                     |                  | 100             | Each               | 36.0000        | 1           | 8            |               |                |        |

\*D3805-1\*

Plate

\*\*

B 91195

(x8)

## Location

## Loc Qty

## Loc Code

WA

30

79621

12

90473

9

90474

9

WA025

4

78127

4

WA030

2

75674

1

80438

1

(x8)

12/10/29 MAL

D3806-1

Manufactured No

100

Each

36.0000

1

8

\*D3806-1\*

Bar

\*\*

B 91201

(x8)

## Location

## Loc Qty

## Loc Code

WA

12

90475

2

90476

10

WA030

24

74888

4

79569

20

(x8)

12/10/29 MAL

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|------------------------------------|--|--------------------------------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |                                    |  |                                      | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                        |                     |                     |  |  | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/> |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>     |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>       |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/>            |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Root Cause</b>  | <b>Date</b>                        | <b>Step</b>                                  | <b>Qty</b>                           | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>   | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Doc/Data <input type="checkbox"/>                            |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Equip/Tooling <input type="checkbox"/>                       |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Operator <input type="checkbox"/>                            |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Material <input type="checkbox"/>                            |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Setup <input type="checkbox"/>                               |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Other <input type="checkbox"/>                               |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Process <input type="checkbox"/>                             |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Supplier <input type="checkbox"/>                            |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Training <input type="checkbox"/>                            |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Unapproved <input type="checkbox"/>                          |                                    |  |                                      |   |                          |   |                        |                     |                     |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| FAULT CATEGORY  |   |   |   |
|---|---|---|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |

# Picklist Print

October-03-12 9:00:54 AM

Page 2

Work Order ID: 91138

\*91138\*

Parent Item: D3805-041

\*D3805-041\*

Parent Item Name: Wearplate Assembly Fwd, Low Gear

Start Date: 03/10/2012

Required Date: 12/11/2012

Start Qty: 8.00

Required Qty: 8.00

D3807-1

Manufactured No

150

Each

34.0000

1

8

\*D3807-1\*

Gasket

\*\*

B90477 (X2) Ae 12.

Location

Loc Qty

Loc Code

FP002

2

69022

2

GA

32

74943

1

76741

2

79625

29

(6)

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |     |   |                      |   |                |              |              |  |  |
|--|------|------|-----|---|----------------------|---|----------------|--------------|--------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |      |      |     | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                |              |              |  |  |
| <b>Root Cause</b>  | Date | Step | Qty | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description   | Sign &<br>Date | Verification | QC Inspector |  |  |
| Doc/Data <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Equip/Tooling <input type="checkbox"/>                       |      |      |     |   |                      |   |                |              |              |  |  |
| Operator <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Material <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Setup <input type="checkbox"/>                               |      |      |     |   |                      |   |                |              |              |  |  |
| Other <input type="checkbox"/>                               |      |      |     |   |                      |   |                |              |              |  |  |
| Process <input type="checkbox"/>                             |      |      |     |   |                      |   |                |              |              |  |  |
| Supplier <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Training <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Unapproved <input type="checkbox"/>                          |      |      |     |   |                      |   |                |              |              |  |  |

| FAULT CATEGORY  |   |   |  |   |
|---|---|---|--|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |

8

7

6

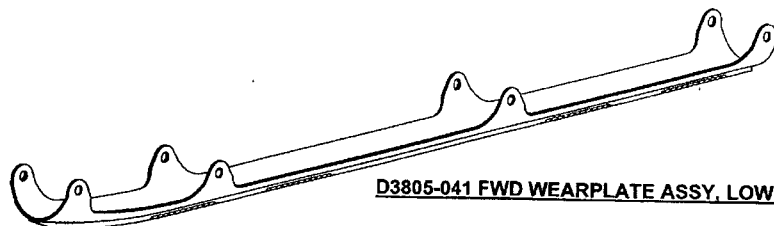
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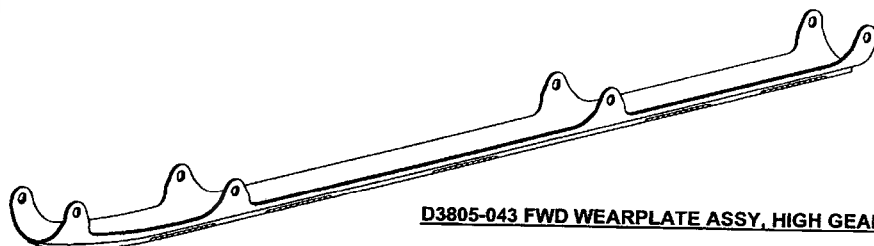
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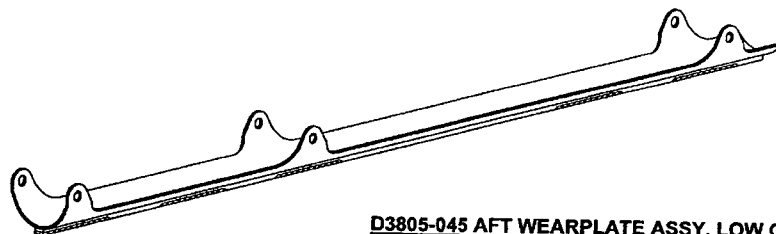
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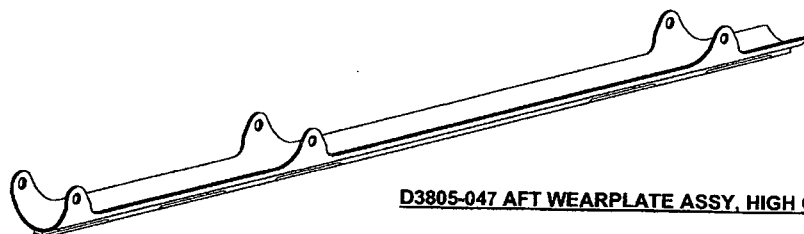
**D3805-041 FWD WEARPLATE ASSY, LOW GEAR**



**D3805-043 FWD WEARPLATE ASSY, HIGH GEAR**



**D3805-045 AFT WEARPLATE ASSY, LOW GEAR**



**D3805-047 AFT WEARPLATE ASSY, HIGH GEAR**

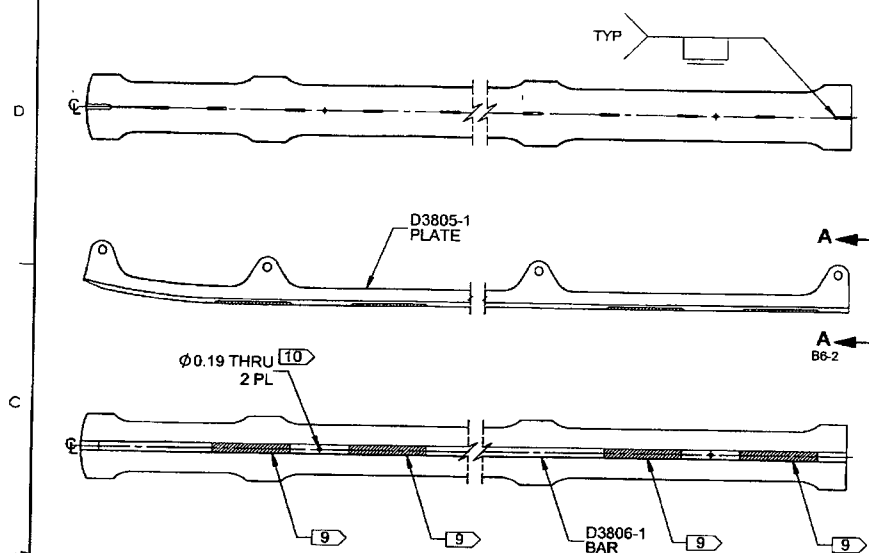
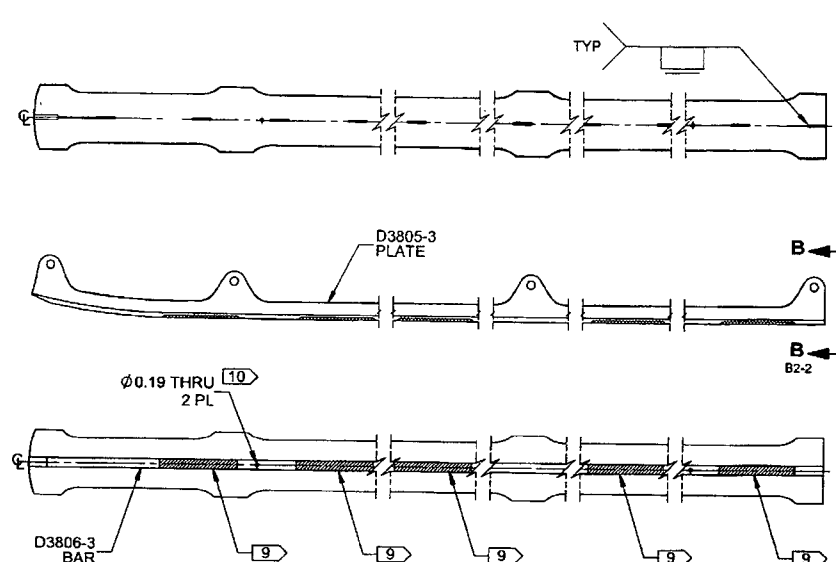
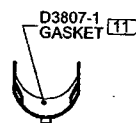
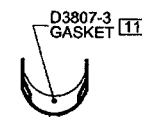
| ITEM | QTY<br>-041 | QTY<br>-043 | QTY<br>-045 | QTY<br>-047 | P/N                | DESCRIPTION                   |
|------|-------------|-------------|-------------|-------------|--------------------|-------------------------------|
| 1    | X           |             |             |             | D3805-041          | FWD WEARPLATE ASSY, LOW GEAR  |
| 2    |             | X           |             |             | D3805-043          | FWD WEARPLATE ASSY, HIGH GEAR |
| 3    |             |             | X           |             | D3805-045          | AFT WEARPLATE ASSY, LOW GEAR  |
| 4    |             |             |             | X           | D3805-047          | AFT WEARPLATE ASSY, HIGH GEAR |
| 11   | 1           |             |             |             | D3805-1            | PLATE                         |
| 12   |             | 1           |             |             | D3805-3            | PLATE                         |
| 13   |             |             | 1           |             | D3805-5            | PLATE                         |
| 14   |             |             |             | 1           | D3805-7            | PLATE                         |
| 15   | 1           |             |             |             | D3806-1            | BAR                           |
| 16   |             | 1           |             |             | D3806-3            | BAR                           |
| 17   |             |             | 1           |             | D3806-5            | BAR                           |
| 18   |             |             |             | 1           | D3806-7            | BAR                           |
| 19   | 1           |             |             |             | D3807-1            | GASKET                        |
| 20   |             | 1           |             |             | D3807-3            | GASKET                        |
| 21   |             |             | 1           |             | D3807-5            | GASKET                        |
| 22   |             |             |             | 1           | D3807-7            | GASKET                        |
| 31   | A/R         | A/R         | A/R         | A/R         | 2059B              | HARDCOAT                      |
| 32   | A/R         | A/R         | A/R         | A/R         | 1300<br>(OR 1300L) | 3M SCOTCH-GRIP ADHESIVE       |

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

|            |   |   |              |
|------------|---|---|--------------|
| B          | REVISED D3805-1F-3F TO EASE MANUFACTURABILITY<br>(ADDED CUTOOUT AT FWD END OF PLATE PER PART 11-106)<br>AND RE-ORGANIZED NOTES SHEETS 2 & 3 | MB  | 11.09.16     |
| A          | NEW ISSUE   | MB  | 08.11.21     |
| REV.       | DESCRIPTION   | BY  | DATE         |
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| CHECKED    |   | DRAWING NO.   | REV. B       |
| MFG. APPR. |   | D3805   | SHEET 1 OF 8 |
| APPROVED   |   | TITLE   | SCALE        |
| DE APPR.   |   | WEARPLATE ASSY  | NTS          |
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**D3805-041 FWD WEARPLATE ASSY, LOW GEAR****D3805-043 FWD WEARPLATE ASSY, HIGH GEAR****VIEW A-A C5-2****VIEW B-B C1-2**

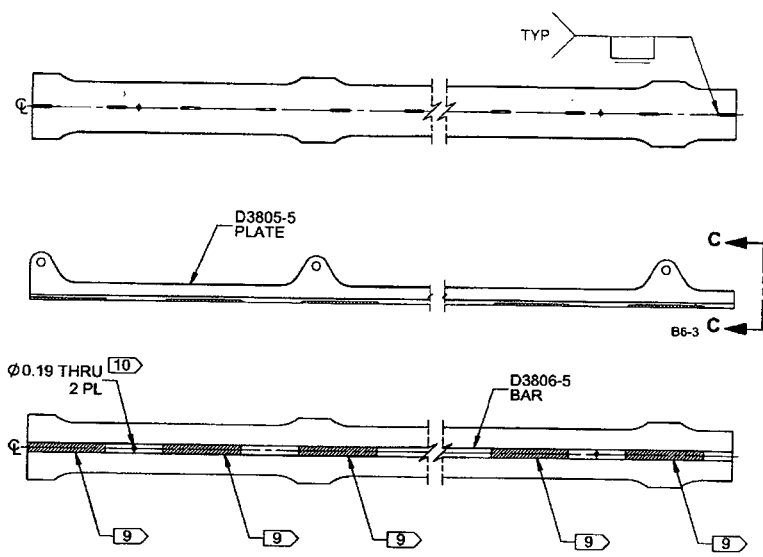
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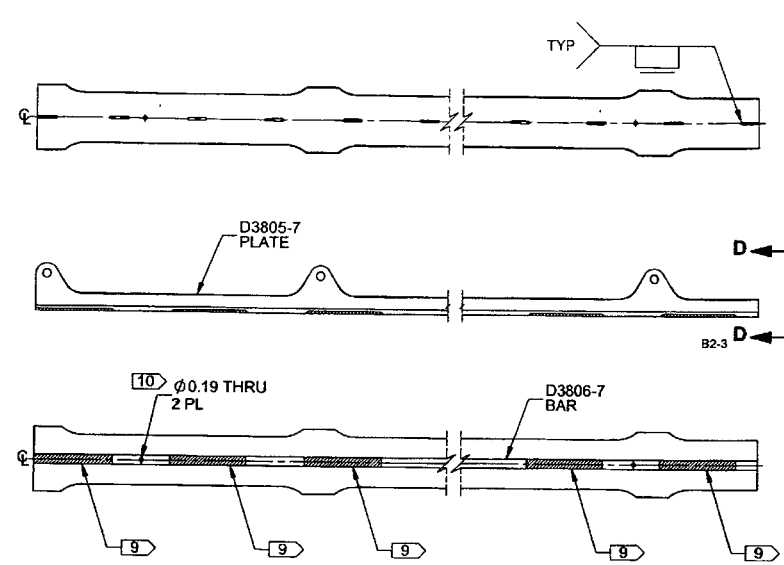
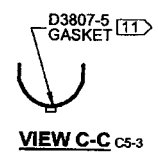
- 1) MATERIAL: N/A
- 2) FINISH: POWDER COAT "GREY SANDTEX" (4.3.5.6) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3805-04X" USING FINE POINT PERMANENT INK MARKER
- 7) WEIGHT: D3805-041 = 4.18 lbs; D3805-043 = 4.78 lbs
- 8) WELDING: PER QSI 004
- 9) 2059B HARDCOAT WELD, 0.19 THICK X 0.50 WIDE, FLUSH WITH D3806-X BAR ON ALL 3 SURFACES
- 10) AFTER WELDING, TRANSFER DRILL THRU BAR FROM PLATE
- 11) AFTER FINISH, BOND D3807-X GASKET TO INNER SURFACE OF WEARPLATE USING A THIN LAYER OF 3M 1300/1300L SCOTCH GRIP ADHESIVE

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| MFG. APPR. |  | D3805   | SHEET 2 OF 8 |
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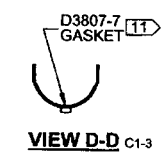
91138



**D3805-045 AFT WEARPLATE ASSY.**



**D3805-047 AFT WEARPLATE ASSY.**



- NOTES:**
- 1) MATERIAL: N/A
  - 2) FINISH: POWDER COAT "GREY SANDEXT" (4.3.5.6) PER DART QSI 005 4.3
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: N/A
  - 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3805-04X" USING FINE POINT PERMANENT INK MARKER
  - 7) WEIGHT: D3805-045 = 4.24 lbs; D3805-047 = 4.53 lbs
  - 8) WELDING: PER QSI 004
  - 9) 2059B HARDCOAT WELD, 0.19 THICK X 0.50 WIDE, FLUSH WITH D3806-X BAR ON ALL 3 SURFACES
  - 10) AFTER WELDING, TRANSFER DRILL THRU BAR FROM PLATE
  - 11) AFTER FINISH, BOND D3807-X GASKET TO INNER SURFACE OF WEARPLATE USING A THIN LAYER OF 3M 1300/1300L SCOTCH GRIP ADHESIVE

|            |          |  |              |
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| MFG. APPR. |          | D3805  | SHEET 3 OF 8 |
| APPROVED   |          | TITLE  | SCALE        |
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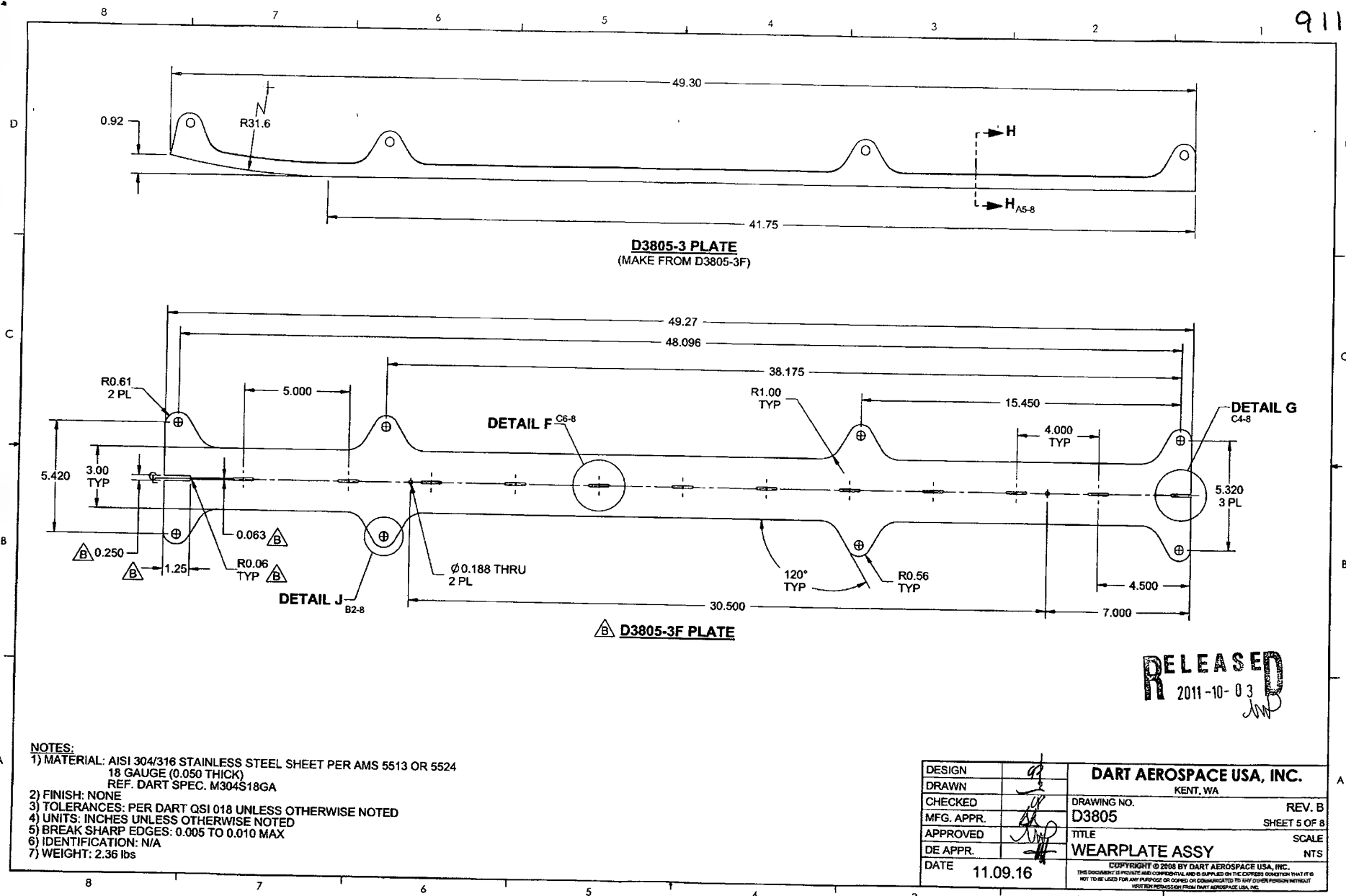
- 2) FINISH: NONE  
3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED  
4) UNITS: INCHES UNLESS OTHERWISE NOTED  
5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX  
6) IDENTIFICATION: N/A  
7) WEIGHT: 2.11 lbs

MA

|            |          |  |              |
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| MFG. APPR. |          | D3805  | SHEET 4 OF 4 |
| APPROVED   |          | TITLE  | SCALE        |
| DE APPR.   |          | <b>WEARPLATE ASSY</b>  | NT:          |
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**D3805-3 PLATE**  
(MAKE FROM D3805-3F)

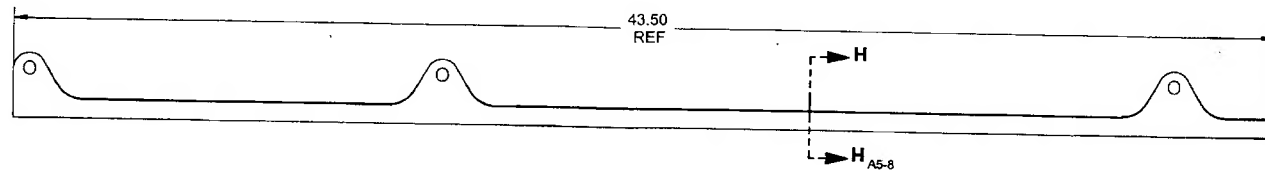
**D3805-3F PLATE**

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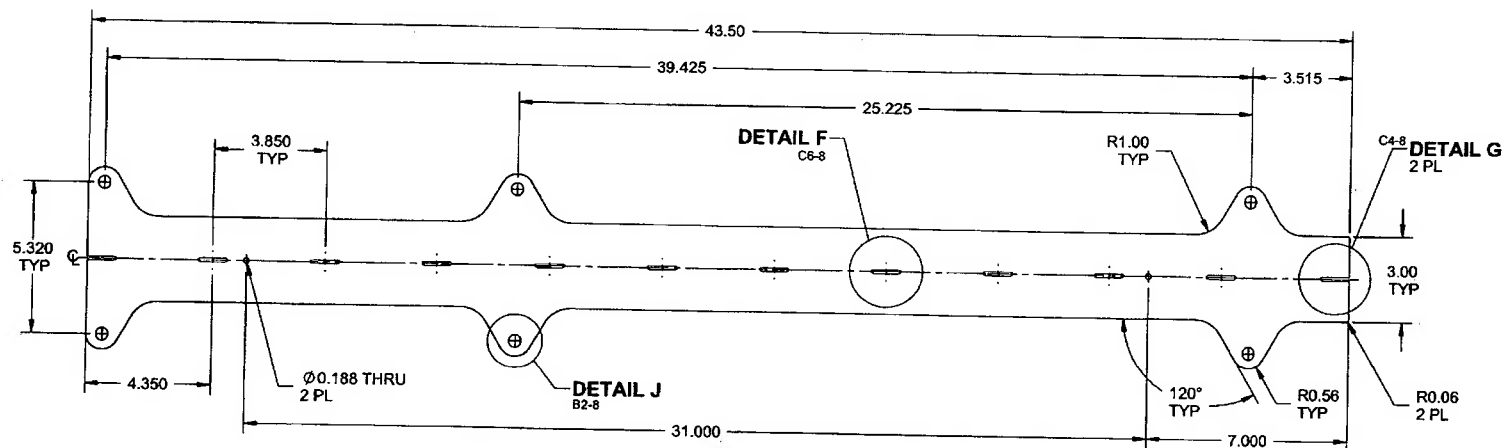
- NOTES:**
- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SHEET PER AMS 5513 OR 5524  
18 GAUGE (0.050 THICK)  
REF. DART SPEC. M304S18GA
  - 2) FINISH: NONE
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
  - 6) IDENTIFICATION: N/A
  - 7) WEIGHT: 2.36 lbs

|            |          |   |              |
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| MFG. APPR. |          | <b>D3805</b>  | SHEET 5 OF 8 |
| APPROVED   |          | TITLE   | SCALE        |
| DE APPR.   |          | <b>WEARPLATE ASSY</b>   | NTS          |
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**D3805-5 PLATE**  
(MAKE FROM D3805-5F)



**D3805-5F PLATE**

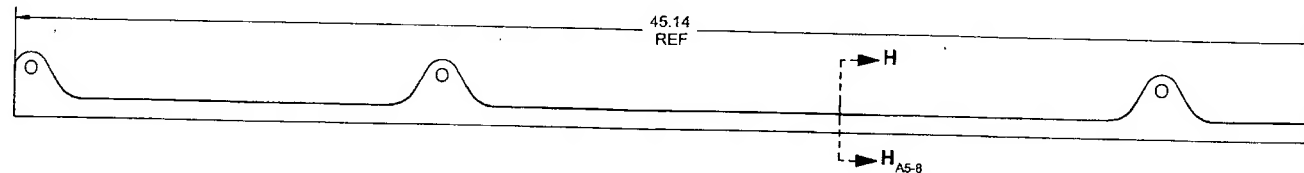
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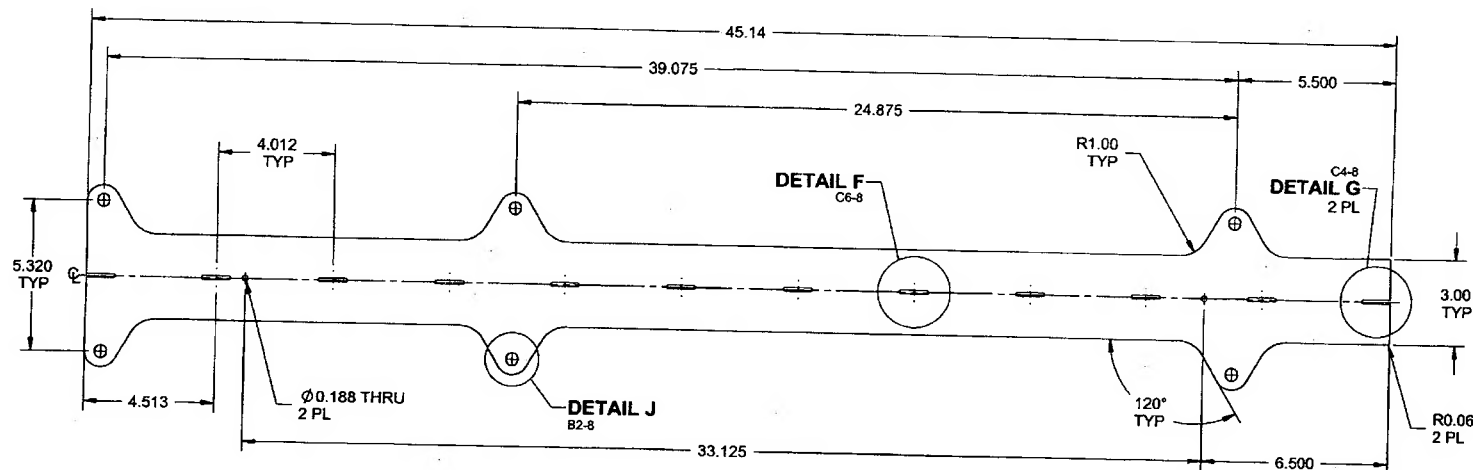
- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SHEET PER AMS 5513 OR 5524  
18 GAUGE (0.050 THICK)  
REF. DART SPEC. M304S18GA
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 2.06 lbs

|            |          |   |              |
|------------|----------|---|--------------|
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| MFG. APPR. |          | <b>D3805</b>  | SHEET 6 OF 8 |
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**D3805-7 PLATE**  
(MAKE FROM D3805-7F)



**D3805-7F PLATE**

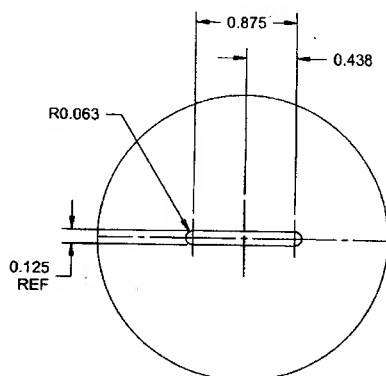
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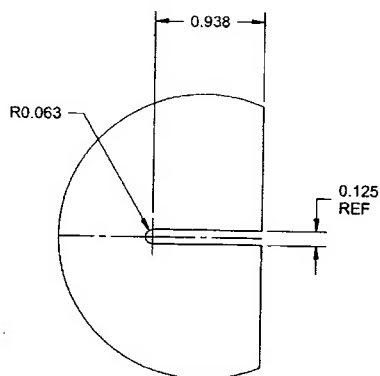
- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SHEET PER AMS 5513 OR 5524  
18 GAUGE (0.050 THICK)  
REF. DART SPEC. M304S18GA
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 2.13 lbs

|            |          |   |              |
|------------|----------|---|--------------|
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| MFG. APPR. |          | D3805   | SHEET 7 OF 8 |
| APPROVED   |          | TITLE   | SCALE        |
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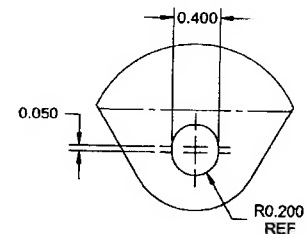
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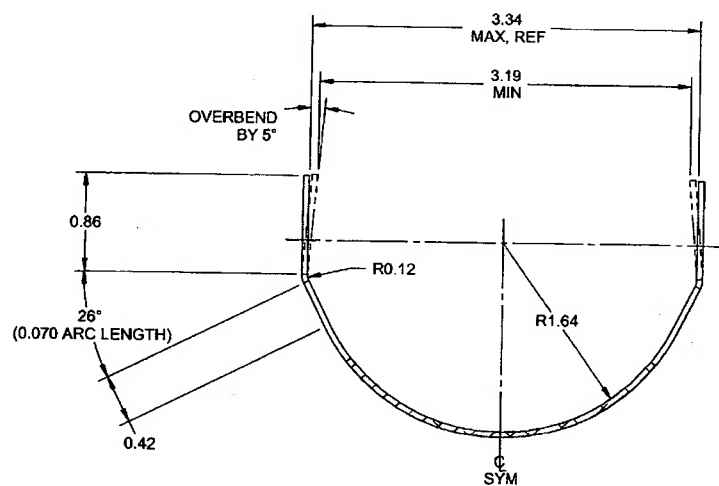
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SLOT DETAIL TYP  
SCALE 4X  
C5-4  
C5-5  
C4-6  
C4-7



**DETAIL G**  
SLOT DETAIL TYP  
SCALE 4X  
C1-4  
C1-5  
C1-6  
C2-7



**DETAIL J**  
SCALE 4X  
B6-4  
B7-5  
B5-6  
B5-7



**SECTION H-H**  
SCALE 4X  
D3-4  
D3-5  
D3-6  
D3-7

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| CHECKED    |          | DRAWING NO.   | REV. B       |
| MFG. APPR. |          | D3805   | SHEET 8 OF 8 |
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| DE APPR.   |          | WEARPLATE ASSY  | NTS          |
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